



DEPUTY SECRETARY OF DEFENSE
1010 DEFENSE PENTAGON
WASHINGTON, DC 20301-1010

AUG 3 2001

Honorable Bob Stump
Chairman, Committee on Armed Services
House of Representatives
Washington, DC 20515-6035

Dear Mr. Chairman:

I am pleased to forward the report prescribed in Section 721 of the National Defense Authorization Act for Fiscal Year 1995. Section 721 requires the Secretary of Defense to report to Congress on outreach to Gulf War veterans; revision of Physical Evaluation Board criteria; and review of records and re-evaluation of the ratings of previously discharged Gulf War veterans. This report covers activities during calendar years 1999 and 2000.

The enclosed report references the work done by the Office of the Special Assistant for Gulf War Illnesses and the final report of the Presidential Special Oversight Board for Department of Defense Investigations of Gulf War Chemical and Biological Incidents.

Thank you for your continuing support of the Military Health System.

Sincerely,

A handwritten signature in black ink, reading "Paul Wolfowitz", is positioned below the word "Sincerely,".

Enclosure:
As stated

cc:
Honorable Ike Skelton
Ranking Democrat



Report to Congress



Department of Defense

Outreach to Gulf War Veterans

Calendar Years 1999 and 2000

Department of Defense Report to Congress

Outreach to Gulf War Veterans

Calendar Years 1999 and 2000

Executive Summary

Statutory Requirement

The National Defense Authorization Act for Fiscal Year 1995 (Public Law 103-337) was enacted October 5, 1994. Section 721 of this law requires an annual report to Congress on three main points:

- Outreach to Persian Gulf War veterans

- Revision of Physical Evaluation Board criteria; and,

- Review of records and reevaluation of the ratings of previously discharged Gulf War veterans.

Overview of Previous Effort

Within 18 months of the Gulf War deployment, the Department partnered with the Department of Veterans Affairs (VA) to revise the Physical Evaluation Board (PEB) criteria. A comparison of the PEB dispositions between Gulf War and non-Gulf War veterans is contained in the report. Due to the completion of the revision of the PEB criteria and the multiple records reviews that occur throughout the discharge rating process, this report primarily describes the actions taken by DoD to inform Gulf War veterans and their families about medical care and information and services available to those experiencing symptoms that may be related to service in the Gulf War.

Overview of Outreach Effort

The channels of communication established with Gulf War veterans include a wide array of ongoing printed, telephonic, and electronic media such as the *GulfLINK* website, *GulfNEWS* newsletter, and meetings conducted by the Special Assistant to the Deputy Secretary of Defense for Gulf War Illnesses.

The establishment of the Veterans Affairs (VA) Registry Program in 1992 and the Department of Defense (DoD) Comprehensive Clinical Evaluation Program in 1994 were important initiatives as both the DoD and VA worked together to assess patient care needs following the Gulf War deployment by using comparable examination procedures and data

fields. This theme of partnership across federal agencies was followed by the joint DoD, VA, and Health and Human Services (HHS) Research Working Group of the Persian Gulf Veterans Coordinating Board (PGVCB/RWG). The RWG continues to inform DoD and VA health care providers of the unique clinical characteristics of the Gulf War veterans.

The work of the Office of the Special Assistant to the Under Secretary of Defense (Personnel and Readiness) for Gulf War Illnesses (OSAGWI) has played a key role in the Department's outreach program. It has actively clarified anecdotal events with interagency investigation and harnessed the efforts of other work groups in developing clear and candid messages for veterans. This office will continue to serve the active duty and reserve forces and veterans with their expanded mandate as the Office of the Special Assistant to the Secretary of Defense for Gulf War Illnesses, Medical Readiness, and Military Deployments.

Department of Defense Report to Congress

Background

Background

This section of the report responds to the Act which requires the Secretary of Defense to submit to the President and the House of Representatives an annual report on the status of the Department's efforts to address the needs of the injured and ill service members.

The Act requires the Secretary of Defense to consult with the Secretary of Veterans Affairs and the Secretary of Health and Human Services to ensure that the case definitions for war-related disabilities are consistent with the criteria used by the Department of Veterans Affairs for compensation and benefits. The Act also requires the Secretary of Defense to submit to the President and the House of Representatives an annual report on the status of the Department's efforts to address the needs of the injured and ill service members. The Act further requires the Secretary of Defense to submit to the President and the House of Representatives an annual report on the status of the Department's efforts to address the needs of the injured and ill service members.

The report of the Secretary of Defense states that the Department of Defense is committed to ensuring that the needs of the injured and ill service members are addressed. The report also states that the Department of Defense is committed to ensuring that the needs of the injured and ill service members are addressed. The report further states that the Department of Defense is committed to ensuring that the needs of the injured and ill service members are addressed. The report also states that the Department of Defense is committed to ensuring that the needs of the injured and ill service members are addressed. The report further states that the Department of Defense is committed to ensuring that the needs of the injured and ill service members are addressed.

In a memorandum to the Secretary of Defense, the Secretary of the Army, Navy, and Air Force, dated 1994, the Under Secretary of Defense for Personnel and Readiness outlined DoD policy on the management of service members with post-traumatic stress disorder (PTSD). The memorandum stated that no service member should be discharged or discharged with a disability rating of 10 percent or less if the member has been diagnosed with PTSD.

following Gulf War-service be retired or separated unless:

The member requested retirement or separation in writing,

The member could be medically retired or separated through the disability system with an established diagnosis recognized by the VA Schedule of Ratings and Disabilities (VASRD).

The policy applies to all members serving in the Armed Forces, including those who are already in the Disability Evaluation System (DES).

Effective February 3, 1995, the VA promulgated final regulations establishing a disability rating, based on analogous diagnoses, for illnesses reported following service in the Gulf War. This rating method used signs and symptoms for illnesses for which disability ratings already existed in the VASRD. As DoD is required by law to use the VASRD to rate disabilities, this regulation allowed the DoD DES to more appropriately assess those Service members with medical illnesses following service in the Gulf War.

In a memorandum for the Secretaries of the Army, Navy, and Air Force signed on May 22, 1995, the Under Secretary for Personnel and Readiness again clarified DoD policy on the discharge of members with symptoms of a “Gulf War-related illness” in view of the new VASRD rating criteria for undiagnosed illness. The memorandum stated that illnesses following service in the Gulf War be considered by the DES under normal DES rules and procedures with the following special provisions:

- For any member found unfit for duty based on a physical condition classified by a Medical Evaluation Board (MEB) as an undiagnosed illness following service in the Gulf War, the PEB will use the VASRD evaluation by analogy rule adopted by the VA to make a disability rating;

Whenever a MEB determines that a case should be referred to a PEB based on a physical condition involving an undiagnosed illness following Gulf War service, the MEB will include in its review of the member’s condition the results of the Comprehensive Clinical Evaluation Program (CCEP) or a comparable military medical system evaluation.

Review of Records and Re-rating of Previously Discharged Gulf War Veterans

Section 721(f) of the Act required the Secretary of Defense, in consultation with the Secretary of Veterans Affairs, to ensure a review of the health and personnel records of each

Gulf War veteran who before October 5, 1994, was discharged from active duty or was medically retired as a result of the PEB process. This review ensured a reevaluation of former Gulf War veterans who may have been suffering from an illness following service in the Gulf War at the time of discharge or retirement from active prior to the criteria established under section 721(e) and, if appropriate, re-rated.

The PEB performs multiple reviews of health and personnel records to determine fitness for continued military service. Because of the efficiency and effectiveness of this review process, a re-rating of those members previously separated for medical illnesses following service in the Gulf War is unnecessary. Once separated from the service, the veteran is eligible to apply for the VA for a separate second evaluation of disability in the civilian workplace. Service members who were discharged without the MEB and PEB evaluation (therefore, fit for continuation on active duty at the time of discharge) are eligible to apply for disability and to be examined and if warranted, rated for disability by the VA.

The Department believes the purpose of section 721(f) – to assure that all Gulf War veterans who were medically separated or retired from active duty due to illnesses following service in the Gulf War have the benefit of accurate disability ratings – has been achieved. Any such veteran who desires a re-rating may obtain it from the VA.

Outreach to Gulf War Veterans

Background

Because of concerns for the reported medical problems of Gulf War veterans and to better understand the nature of the diverse symptoms being reported, DoD established several research, health assessment, and communication initiatives in 1994. The Defense Department's efforts have been coordinated and integrated with similar efforts within the Departments of Health and Human Services and Veterans Affairs. These combined efforts have investigated the possible health effects of ten potential sources of exposure during the Gulf War experience: smoke from oil well fires, chemical and biological warfare agents, vaccines and medications, depleted uranium, indigenous infectious disease, pesticides, sand, and stress.

Following the DoD revelations that U.S. and coalition forces may have been exposed to low-level nerve agents from the destruction of Iraqi ammunition stores at Khamisiyah, Iraq, Dr. John White, the Deputy Secretary of Defense established the Office of the Special Assistant for Gulf War Illnesses (OSAGWI) on November 12, 1996. Dr. White granted OSAGWI broad authority to coordinate all aspects of the Department's program for Gulf War veterans. In addition to conducting full-scale investigations of this event, the Office of the Special Assistant operated under a three-part mission under which they endeavored to:

- Determine the causes of the so-called "Gulf War illnesses",
- Ensure that veterans were receiving proper care, and,
- Recommend to the Secretary of Defense changes in doctrine, policy, and procedures to reduce the risks to troops during future deployments.

OSAGWI changed the way DoD had approached the issue of illnesses experienced by Gulf War veterans. OSAGWI:

Focused on the Gulf War veterans and listened to their concerns and problems in order to incorporate what they were saying into its investigations;

Developed a dynamic outreach program to effectively communicate with Gulf War veterans;

Expanded the formal investigation process to determine whether or not the Gulf War veterans were exposed to chemical or biological agents in theater; and,

Expanded the investigations to include potential exposures of Gulf War veterans to environmental and occupational sources.

To date, OSAGWI has published seventeen case narratives, four environmental exposure reports and nine information papers as a result of its investigations into possible chemical and biological incidents and into environmental factors that may have contributed to adverse health outcomes. In calendar year 2000, OSAGWI published 20 final or interim reports. In summary, OSAGWI has devoted considerable effort to providing veterans, military personnel, and the public with timely and accurate information.

The Aftermath of War: What History and Research Have Taught Us

Since the Civil War, physicians have documented chronic, enigmatic, and disabling post-war physical symptoms among veterans. Unexplained physical symptoms have become an especially contentious issue for veterans, policy makers, scientists, and clinicians after the Gulf War. Over 43% of the first 18,000 veterans seeking DoD care for Gulf War health concerns were diagnosed with an “ill-defined” condition, and nearly 18% had an “ill-defined” condition as a primary diagnosis.

As part of the Comprehensive Clinical Evaluation Program established in 1994, the Gulf War Veterans’ Illnesses research program of the Department continues to:

- Further the fundamental understanding of the illnesses experienced by Gulf War veterans;
Provide enhanced diagnostic capabilities and efficacious treatment modalities for veterans; and,
Support the establishment of policies and preventive measures that minimize the risk of such illnesses during future military operations.

Competition and independent peer review are used to secure the research performers, hypotheses, and experimental designs, from all possible sources, including the Federal, civilian, national and international communities. This commitment at all levels within the Department of our responsibility assists our Gulf War veterans to secure diagnoses and treatments for disabilities and illnesses, and to prevent such disabilities and illnesses as a consequence of future deployments.

The strategy of the joint DoD, VA, and HHS research program involves a multidisciplinary approach along many different and novel scientific lines by scientists and clinicians in Federal, academic, and private institutions. Efforts within the Department to care for the Gulf War veterans have reinforced appreciation of the seriousness of their health

complaints, and our military physicians fully recognize that these veterans require careful evaluations and appropriate therapeutic programs. The specialized care center at the Walter Reed Army Medical Center (WRAMC) continues to offer a more intensive therapeutic program for those veterans on active duty or in the reserves with more disabling health problems since their Gulf War service. Beginning in February 1999, veterans enrolled in the specialized care center at WRAMC were invited to visit OSAGWI's offices. The visits were considered successful and continued on a monthly basis. The visits include an orientation briefing, a meeting with the Deputy Special Assistant and a tour of the OSAGWI facilities.

Current Force Health Protection initiatives reflect the lessons learned during and since the Gulf War. The Department has implemented policies and programs to improve the health of all who serve our nation, now, and in the future. Ten years after the Gulf War, however, we have not relaxed our commitment to care for those veterans of the Gulf War and their families who are ill and believe that the illnesses are related to wartime service. To date:

No single diagnosable illness or set of symptoms with known etiology characterizes Gulf War veterans.

VA and DoD data systems do not demonstrate a higher incidence of hospitalizations or deaths among Gulf War veterans,

The incidence of birth defects in children and the incidence of health problems among spouses are not higher for Gulf War veterans than for other veterans.

There does seem to be a higher prevalence of some symptoms among veterans who served in the Gulf War as compared to non-deployed veterans. The primary symptoms include fatigue, difficulty concentrating, memory loss, skin rash, headache, and muscle and joint pain.

For some veterans, the symptoms are severe enough to be disabling; others experience milder symptoms that still allow some level of normal daily activity, while others report no symptoms at all.

Veterans' symptoms have not shown correlation with exposure to any particular physical or psychological stimulus.

Total Force Outreach Program

The Total Force Outreach Program, developed by OSAGWI in 1998, is the Department's major comprehensive effort to respond to the needs and concerns of Gulf War veterans, active

duty members, reservists and their families. Through the Total Force Outreach Program, OSAGWI has reached nearly 70,000 veterans, service members, their families, and members of the general public. More than 20,000 Gulf War veterans participated in one-on-one interactions with OSAGWI staff. In calendar year 1999, the outreach team visited 11 military installations and participated in 27 conferences, conventions, and other events hosted by Veterans Service Organizations (VSOs) and Military Service Organizations (MSOs). In calendar year 2000, outreach teams visited 56 military installations and participated in 20 conferences, conventions, and other events hosted by veterans and military service organizations. Participation in such events provides important information to the nearly 10 million members these organizations represent about DoD's efforts to respond to Gulf War veterans' concerns.

GulfLINK, (www.gulflink.osd.mil), has provided the public and especially the veterans' community with a valuable resource for furthering its understanding of illnesses following service in the Gulf War. The user-friendly site has received several awards and has been rated as one of the best federal government websites. *GulfLINK* averages more than 240,000 visitors per month and offers a wide array of information as well as hyperlinks to other web sites. Visitors can access speeches, all OSAGWI publications, and a host of other data. The direct email connection on the *GulfLINK* site facilitates queries or comments (more than 1,500 annually). *GulfLINK* will remain in operation and updates on Gulf War-specific issues will continue to appear on *GulfLINK* in addition to archived material. *GulfLINK* will also be linked with the new *DeploymentLINK* website, which will be devoted to contemporary medical readiness and deployment health issues.

GulfNEWS, a bimonthly four-page newsletter in print and electronic versions, highlights events of interest to Gulf War veterans. This includes presentation of timely features based on ongoing or released case narratives, information papers, and environmental exposure reports. Topics covered in calendar year 1999 included the two DoD/VA/HHS sponsored clinical trials that used antibiotics or exercise with behavioral therapy. Among the topics covered in calendar year 2000 were articles on the streamlined Veterans Affairs disability process, a description of the depleted uranium research, and the effects of low-level exposure to nerve agents.

Veterans' Correspondence and Hotline

During calendar year 1999, OSAGWI received close to 4,500 calls and letters. During calendar year 2000, OSAGWI logged 15,500 outreach-related contacts — through email (9,000),

calls (5,700), and letters (800). Veteran contact managers staffing the toll-free phone line continue to respond to individual inquiries and conduct interviews supporting ongoing investigations of possible chemical warfare agent exposures, environmental hazards, and other related health issues.

Notifications

OSAGWI continues to notify individual veterans in conjunction with the release of certain case narratives, information papers, and environmental exposure reports. These letters of notification include requests for veterans to provide additional information to aid in the investigation effort. In calendar year 2000, OSAGWI sent 142,214 letters to Gulf War veterans about Chemical Agent Resistant Coating (CARC), the M256A1 chemical agent detector kit, and the revised Khamisiyah report. During the past four years, more than 398,000 notification letters were sent to Gulf War veterans.

Liaison with Veterans and Military Service Organizations

The OSAGWI Public Affairs office has established direct and frequent communication with the Veterans Service Organizations (VSOs) and Military Service Organizations (MSOs). VSOs and MSOs regularly receive updates and briefings on OSAGWI and other Gulf War veterans initiatives, such as the comprehensive treatment program offered at Walter Reed Army Medical Center. OSAGWI leadership meets regularly with VSO/MSO leadership counterparts and OSAGWI regularly sends information displays and veteran contact managers to major VSO and MSO national and regional conventions.

Ten VSO/MSO meetings were held in 2000. To ensure that the VSOs and MSOs receive reports promptly, OSAGWI staff provide special briefings before publicly releasing case narratives and environmental exposure reports. The calendar years 1999 and 2000 Total Force Outreach itinerary included two-to four-day information exchanges during which experts briefed service members, leadership at all levels, medical staff, Gulf War veterans, family members, community groups, community service organizations, installation staff, and the general public. Outreach teams offered special evening sessions to maximize participation. To reach those unable to attend the briefings, team members manned several displays placed in high-traffic areas, such as the installation exchange, commissary, and hospital and demonstrated *GulfLINK* and answered questions. Among the topics covered at the town hall briefings and displays were results of investigations into possible exposures from chemical or biological warfare agents,

DoD force health protection efforts, and resources available to Gulf War veterans and their families. Because many veterans' concerns fall within the purview of then Department of Veterans Affairs (VA), staff from local and regional VA offices participated in the town hall meetings as well. Many outreach presentations also included representatives from DoD's Anthrax Vaccine Immunization Program to address Gulf War veterans' concerns.

The outreach visits for calendar year 1999, conducted at eight Army posts and three Marine Corps bases, resulted in the team meeting with more than 48,000 members of the total force. There were 750 requests for copies of the OSAGWI investigative reports and circulation of *Gulf News* reached 22,000. Outreach visits during the year 2000 — conducted at 35 Army posts, 10 Navy bases, two Marine Corps Bases, and nine Air Force bases — provided the outreach team an opportunity to contact and meet with more than 9,000 Gulf War veterans or their family members. The team received more than 200 requests for copies of investigative reports and added more than 3,000 people to the mailing list for *GulfNEWS*, increasing its bimonthly circulation from the 1997 total of 2,000 readers to more than 27,000 current readers.

Over the past four years, the Office of the Special Assistant held 32 Town Hall meetings to establish a dialogue with Gulf War veterans, to provide information about resources and ongoing research, and to address their concerns.

Medical Outreach — Helping Veterans Obtain Care

Although the Office of the Special Assistant does not directly provide health care to veterans, OSAGWI staff help veterans obtain needed medical care by providing information directly to veterans and their families who have contacted the OSAGWI staff through email, telephone, Congressional requests, and face-to-face requests at outreach meetings. Through these interactions, Gulf War veterans have obtained better access to care, obtained second opinions or received the information they needed.

The Medical Readiness Directorate (MRD) of OSAGWI identified and catalogued nearly 28,000 Gulf War inpatient treatment records archived at the National Personnel Records Center (NPRC) in St. Louis, MO, making it possible for veterans to request and receive copies of their medical records. Many veterans could not obtain records because they were filed by the name of the field hospital to which they were admitted. The MRD staff created a cross-referenced index to all of the records from the Gulf War hospitals so it could match any hospitalized veteran with the admitting field hospital. Upon request, the MRD staff sent veterans the standard form for

requesting copies of NPRC records. The efforts to notify service members about these records was assisted by the VSOs which published the “800” contact number in their membership magazines and newsletters. Two hundred and forty-one Gulf War veterans have located their records in this manner. This documentation can be crucial to veterans’ applications for benefits such as medical care and disability compensation. MRD has made this cross-referenced index available to the Department of Veterans Affairs. The MRD physicians regularly responded to questions from veterans participating in the Walter Reed Army Medical Center’s Special Care Program. MRD staff have provided information to help Gulf War veterans living in Germany (no longer connected with the military) obtain VA registry medical evaluations. In addition, the MRD physicians have actively informed veterans, scientists, health care providers, and the press of the findings and implications of newly published research results through briefings, interviews, printed abstracts of journal articles, and by posting abstracts on *GulfLINK*.

Foreign Defense Ministry Counterpart Exchange

In 1999, senior OSAGWI officials traveled to Paris, France and London, England to meet with defense officials from both nations and extend cooperation among U.S., British and French efforts to investigate Gulf War issues.

The Paris trip facilitated a relationship between the Office of the Secretary of Defense/OSAGWI and the French Ministry of Defense. This led to the release of important data relating to the incidence of illnesses among France’s Gulf War veterans and revelations about chemical warfare incidents involving French soldiers and detection equipment. This material has been integrated with OSAGWI narratives and reports used to inform U.S. veterans.

The London trip, one in a series of exchanges between the U.S. and the United Kingdom, accomplished similar results with the British Minister of Defense. The British are experiencing the same kind of response to illnesses among their Gulf War veterans as we have and are using the OSAGWI outreach model to enhance their own program.

Saudi Arabian National Guard Study

In 1999, medical specialists from OSAGWI initiated a study of the Saudi National Guard Health Database to examine health trends among Saudi Gulf War veterans and their families. The database of 50,000 records offered the opportunity to research a particularly thorough collection that extends back prior to the war (1983) and continues through the present. The collaborative epidemiological study will compare hospitalization rates, types of diseases reported

and frequency of diseases requiring hospitalization in order to look for patterns. By comparing age, gender, geographic locations during the war and other factors, scientists hope to assemble information that will offer insight to the illnesses reported among U.S. veterans.

Establishment of the Office of the Special Assistant to the Deputy Secretary of Defense for Gulf War Illnesses, Medical Readiness and Military Deployments (OSAGWI-MRMD)

The success of OSAGWI in establishing a credible process to address the concerns of veterans following the Gulf War and to identify strategies that would improve future medical readiness and military deployments led to the Secretary's decision to expand the role of OSAGWI to that of Special Assistant to the Secretary of Defense for Gulf War Illnesses, Military Deployments and Medical Readiness. This designation was effective July 26, 2000. The new office will continue its ongoing communication with VSOs and MSOs to assure them that service members and their families understand what is being done on their behalf. The new organization is poised to build on the competence gained over the past four years in working with veterans to provide proactive support for veterans of future deployments. The Department's established channels of communication—the toll-free phone line, interactive email, website and open forums are a tested foundation for the future.

Summary

The Department believes that the intensive outreach activities described above have met the intent of Congress to communicate effectively with our Gulf War veterans and to offer compassionate care for those with unexplained illnesses or disabling symptoms. The multiple in-person, printed, and electronic channels of communication established, *GulfLINK*, *GulfNEWS*, and the town hall meetings have been well received and used by the veterans and their families.

The establishment of the VA Registry Program in 1992 and the DoD Comprehensive Clinical Evaluation Program in 1994 transformed the ability of both Departments to work together to assess patient care needs following a deployment by using comparable examination procedures and data fields. The joint DoD, VA, and HHS Research Working Group of the Persian Gulf Veterans Coordinating Board continues to inform DoD and VA health care providers of the unique clinical characteristics of the Gulf War veterans. The professional relationships across the three federal agencies have had a synergistic effect in reaching out to veterans with the combined strength of the vast professional clinical, scientific, and communication expertise of the three agencies. OSAGWI faced the investigation and

**United States Army Physical Disability Agency
CASE DISPOSITIONS**

Calendar Years 1991-2000			
Veterans Administration Schedule of Rating for Disabilities Codes	Organ System	Cumulative Cases 79,440	Gulf War Vets 16,225 (20%)*
5000-5398	Musculoskeletal Disorders	53,179 (67%)	10,491 (65%)*
6000-6298	Organs of Special Sense	1,377 (2%)	364 (2%)*
6300-6398	Infectious Disease, Immune Disorders, Nutritional Disorders	981 (1%)	218 (1%)*
6500-6898	Respiratory System	3,401 (4%)	676 (4%)*
7000-7198	Cardiovascular System	2,159 (3%)	424 (3%)*
7200-7398	Digestive System	1,668 (2%)	341 (2%)*
7500-7598	Genitourinary System	769 (1%)	321 (2%) *
7600-7698	Gynecological Conditions	144 (0.2%)	25 (0.15%)*
7700-7798	Heme and Lymphatic Systems	594 (0.8%)	140 (0.8%)*
7800-7898	Skin Disorders	678 (0.9%)	172 (1%)*
7900-7998	Endocrine System	970 (1%)	184 (1%) *
8000-9189	Neuro/Convulsive Disorders	7,220 (9%)	1,309 (8%)*
9200-9598	Mental Disorders	6,252 (8%)	1,551 (10%)*
9900-9998	Dental/Oral Conditions	49 (0.1%)	9 (0.05%)*
Total		79,440 (100%)	16,225 (100%)

* These percentages represent the percentages of Gulf War Veterans with a medical impairment for the System indicated. It does not represent the percentage of Total Cases, which is represented in the first columns.

communication challenges of the aftermath of the Gulf War and prepared the pathway for a systematic approach in support of Force Health Protection, before, during, and after deployments.